

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

(For use with Form PTO/SB/06)

Application Number
UNKNOWN

Filing Date
CONCURRENTLY

Applicant(s)
JOSEPH B. KEJHA

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT									
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend	
1	IND													
2	IND													
3	IND													
4		1,3												
5		1,3												
6		1,3												
7	IND													
8	IND													
9	IND													
10	IND													
11		1,3,7	8,9,10											
12	IND													
13		12												
14		12												
15		12,14												
16		12												
17		12												
18		12												
19		16,18												
20		12												
21		12												
22	IND													
23		22												
24		12												
25	IND													
26		1,2,3												
27		1,3,7	8,9,10											
28														
29														
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41														
42														
43														
44														
45														
46														
47														
48														
49														
50														
Total Indep	10													
Total Depend	17													
Total Claims	27													
51														
52														
53														
54														
55														
56														
57														
58														
59														
60														
61														
62														
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96														
97														
98														
99														
100														
Total Indep														
Total Depend														
Total Claims														

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 350713	FILING DATE					
							APPLICANT(S)						
CLAIMS													
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1						51						
2	1						52						
3	1						53						
4		✓					54						
5		✓					55						
6		✓					56						
7	1						57						
8	1						58						
9	1						59						
10	1						60						
11		✓					61						
12	1						62						
13		✓					63						
14		✓					64						
15		✓					65						
16		✓					66						
17		✓					67						
18		✓					68						
19		✓					69						
20		✓					70						
21		✓					71						
22	✓						72						
23		✓					73						
24		✓					74						
25	✓						75						
26		✓					76						
27		✓					77						
28							78						
29							79						
30							80						
31							81						
32							82						
33							83						
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40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	10	↓		↓		↓	TOTAL IND.		↓		↓		↓
TOTAL DEP.	17	↓		↓		↓	TOTAL DEP.		↓		↓		↓
TOTAL CLAIMS	27						TOTAL CLAIMS						